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PRINTED: 08/02/2011
FORM APPROVED

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES
AND PLAN OF CORRECTION(X1) PROVIDER/SUPPLIER/CLIA
IDENTIFICATION NUMBER:

TN8603

(X2) MULTIPLE CONSTRUCTION

A. BUILDING 01 - MAIN BUILDING 01
B. WING(X3) DATE SURVEY
COMPLETED

08/01/2011

NAME OF PROVIDER OR SUPPLIER

CENTER ON AGING AND HEALTH

STREET ADDRESS, CITY, STATE, ZIP CODE

880 SOUTH MOHAWK DRIVE
ERWIN, TN 37660(X4) ID
PREFIX
TAGSUMMARY STATEMENT OF DEFICIENCIES
(EACH DEFICIENCY MUST BE PRECEDED BY FULL
REGULATORY OR LSC IDENTIFYING INFORMATION)ID
PREFIX
TAGPROVIDER'S PLAN OF CORRECTION
(EACH CORRECTIVE ACTION SHOULD BE
CROSS-REFERENCED TO THE APPROPRIATE
DEFICIENCY)(X5)
COMPLETE
DATE

N 834

1200-8-6-.08(4) Building Standards

N 834

(4) After the application and licensure fees have been submitted, the building construction plans must be submitted to the department. All new facilities shall conform to the current addition of the Standard Building Code, the National Fire Protection Code (NFPA), the National Electrical Code and the AIA Guidelines for Design and Construction of Hospital and Health Care Facilities, and the U.S. Public Health Service Food Code as adopted by the Board for Licensing Health Care Facilities. When referring to height, area or construction type, the Standard Building Code shall prevail. All new and existing facilities are subject to the requirements of the Americans with Disabilities Act (A.D.A.). Where there are conflicts between requirements in the above listed codes and regulations and provisions of this chapter, the most restrictive shall apply.

This Rule is not met as evidenced by:
Based upon observation and interview, the facility failed to assure the Nurse Call System was capable of activation by a resident lying on the floor according to AIA Guidelines, 4.1-10.3.6.3. (1).

Findings include:

Observation and interview with the Maintenance Director, on August 1, 2011 at 11:20 a.m. confirmed all 42 resident rooms in the west wing had the bathroom nurse call pull cords replaced with a pushbutton located 40-inches above the floor.

No residents affected.

42 rooms mentioned in deficiency had push button call system replaced with pull cord call system in bathrooms with cords 6 inches from the floor.

8/10/
2011

Division of Health Care Facilities

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

DATE FORM

SPCO

SU5M21

If continuation sheet 1 of 1

No. 5885 P. 22

Aug. 26, 2011 6:46PM coah